U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number

		M	JLTIPL	E DEP	ENDENT	CLAIN	Λ		10	1565	- 846			ing Date		
FEE CALCULATION SHEET									olican	(6)	1010	1				
1			Substi	lule for F	om PTO-1	360		170	JIICA:	us)						
-			(For us	se with Fo	m PTO/SB	/06)		- 1								
CLA	IMS I	AC	CUED	·				* M	ay be	used for ad	ditional da					
1 50	AIVIS	AS FILED		AFT	AFTER FIRST AMENDMENT		SECOND		<del></del>	*	diaonal da	ins or	ame	ndments		
	_	Indep	Depend	AME			IDMENT	L				1				
1		1	Depend	Indep	Depend	Indep	Depend			Indep	Depend	Ind	en	Depend	<del> </del>	<del></del>
2				<del>                                     </del>	<del></del>				51			<del>  ````</del>	ÇP.	Depend	Indep	Depen
3			<del></del>	<del> </del>	<del>                                     </del>				52			1-			<del> </del>	<del> </del>
4			<del>                                     </del>	+	1 v X				53					7	<del> </del>	<del> </del>
5			1	<del> </del>	Y				54				$\neg$	7	<b> </b>	┼──
6				1	X			-	55					7		<del> </del>
7					V				6	<del>  </del>	·					<del> </del>
8					Y				8				$\Box$	1:		1
9					V				9	lI			4			1
10					X			6	_	<del></del>			4			
12				<b> </b>	X			6	_	<del></del>			4			
13				<del> </del>	17,			6					+	-		<u> </u>
14	-	-+	7	<del> </del>	1-4×-1			6:					$\dashv$	<del></del>		<u> </u>
15		-+	1	<del> </del>	<del>  5  </del>			6					$\dashv$	<del>,  </del>		<del></del>
16	J		1		<del>  \ \  </del>			6.					+			
17			7		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<del></del>		- 66					7			
18			$I_{}$		- X			- 67							-+	
19					7			69								
20			4		V			70		<del></del>			$\bot$			
21			,		X			71	-				4			
23	+-							72	-				+			
24	1-		<del>,'</del>		<del>-}</del>			73					+			
25	1		1		-VV-			74	$\Box$				+			
26			7		<b>V</b>			75	_				_			
27	1.7			7				76 77					$\mathbf{I}^{-}$			
28		$ \vdash$	1		7			78	+				1_			
29		-	1		Y			79	+				4_			
.31	-	-4-			Y			80	+				-			
32	┪—				Y			81	$\neg$			—	-			
33	╅—	-+-	7+		V			82	$\neg$				+-			
34	17			V-	<del>-</del>			83					+			
35	7-		7	_	V-			84					†			
36		1			<del>- ₹ -  </del>			85	- -						-+	
37					7			86 87	+							$\neg \neg$
38	-				X			88		·						
39 40					_ Y			89	- -				_			
41	<del> </del>	_ _/			У			90	1					<del> </del>		]
42	<del> </del>		<del>/</del>		Υ			91	1			,	-			
43	<del>                                     </del>		<del></del>		<del></del>			92	I		$\neg +$	·	<del>                                     </del>			
44				<del> </del> -		_		93	I			. 1	<u> </u>			
45						<del>,  </del> -		94	1				_			
46						<del>',  </del>	<u>-</u>	95								-
47		I			<del></del>			96	+-						$\neg$	
48	<u> </u>					7		97 98	+-							
49	<b> </b>			$\Box$	/			99	+-							
50	<b></b> -					/		100	1-	<del> </del>						
otal fep	3	$\perp 1$	· 1			T	—	Total	1-	<del> -</del> -					$-\!$	
otal								Indep			. 2	4		1	- 1 1	- 1
pend	39	7	- 1	-	' l	<b>←</b>		Total	$\Gamma$	<b>→</b>	100	5 4	J	-		- 1
pend Ital	42	$\top$		T			—-   -	Depend	↓_		120			- 1	7	l
ims	10			1				Total	1		22	2 1				-
							1	Claims	(	1	[スノ	<b>~</b> 1		- 1	- 1	ı

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case Any comments on the amount of time you require to complete this form addor suggestions for reducing this burden, should be sent to the Chief Information Complete U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

ll you need assistance in completing the form, call 1-800-PTO-9199 and select option 2 CANCEL CLAIMS 1-42 ADD NEW CLAS 1-22